State of South Dakota

Candidate's or Committee's Report of Receipts and Expenditure CEIVED

Candidate's of Committees Support of Acceptable Support of Support of Acceptable Support of Support

See pages 9 & 10 of the Guideline Book for specific instructions on completing this report.
Name of Candidate or Committee Rick Baneamasta
Complete Mailing Address 106 SPRING MEADOWDRIFE #2 DEURAPIDS SD 57022
Name of Person Making Report Daytime Phone Number
If you are a candidate, what office are you seeking? AUSE OF REPRESENTATIONS, LD25
If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed.
Type of Report (See pages 4 & 5 of Guideline Book)
For Reporting Period Ending (See pages 4 & 5 of Guideline Book)
The following verification must be completed before submitting report. VERIFICATION OF PERSON MAKING REPORT I
this report and to the best of my knowledge and belief it is true, correct and complete.
Date: 13/28/06 Acid Signature or
Signature of Committee Treasurer or Chairperson Revised July 2001 Filed this
Chi Melson SECRETARY OF STATE

Name of Candidate or Committee_	LICK BALLERMOSETER	
For the reporting period ending	Dec. 3/2006	

Schedule A – Direct Contributions

This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and the same from political parties and enter these sums as unitemized contributions on their respective lines below and on the next page. Any contribution of more than \$100 or aggregate during a calendar year from an individual or political party and all contributions from PAC's must be entered as a separate item (itemized) giving the amount, name, address and place of employment (if applicable) of the contributor. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space, or you may attach additional sheets of paper.

Unitemized Contributions fron			*\$ _	
temized Contributions from In	adividuals			
Name	Residence Address	Place of Employment (Name of Employer)		
1 Valle	Residence Address	(Name of Employer)	٦ .	
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Total of Itemized Contribution			_] \$_	0

Total of Itemized Contributions from Political Action Committees:

Total of All Direct Contributions (Sum of all lines with an *)

For the reporting period ending:		
	- Fund-Raising Events Proceeds e money for the candidate and the net proceeds of	lerived from each event. If a 0 in the calendar year, those
Type or Name of Event		Net Proceeds
		0
		
Fotal:		_6_
contributor, residence address and place of employn	Name, Residence Address &	
Nature of Non-Cash Contribution	Place of Employment	Estimated Value
Total:		
Use this schedule to report any refunds, interest earn	nedule D - Other Income med or other income which is not a direct contrib	ution.
Source of Income		Amount

Total:

Name of Candidate or Committee: Rxx Brancamers 7200. For the reporting period ending: 44 Dec. 3 2006
C. I. I. E. Evnanditures

Schedule E - Expenditures

This schedule is to report all expenditures relating to a candidate's campaign. Line items have been provided for reporting common expenses. All other expenses should be listed. All contributions to candidates and committees must be listed individually.

Evn	enses	Contributions Made to Candidates a	Amount
	Amount	Name of Candidate or Committee	
em dvertising			
onsulting			
ostage			
rinting			
ent		_	
alaries			
'elephone			
ravel			
Itilities			
ist other expense	List other expense		
tems below	amounts below		
Total Expenditu			

Name of Candidate or Co	mmittee: Kick Brussen	Appendix I			
For the reporting period e	ending: The Street De	.3(,2006)			
Schedule F - Debts and Obligations This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.					
Owed to:	Purpose:	Amount			
					
<u></u>					
	· · · · · · · · · · · · · · · · · · ·				

Total Obligations:

	s summary sheet will give a brief outline of all car in the schedules previously completed.		mary Pa	· ·	ng period. Pl	ease tra	insfer all total
1.	Amount on hand, if any, at the beginning	g of the	reporting	period:		\$	0_
2.	Receipts						
	Schedule A - Direct Contributions	\$	0				
	Schedule B - Fund-Raising Events	\$	0	_			
	Schedule C - In Kind Contributions	\$					
	Schedule D - Other Income	\$	<u></u>				
	Total of all Receipts	\$	<u>8</u>	_			
3.	Total Monetary Receipts (A+B+D)					\$	6_
4.	4. Candidate's Personal Contribution to Own Campaign \$			_&			
5.	5. Monetary Loans to Candidate or Committee During Reporting Period \$		\$	_0			
6.	6. Monetary Loans Repaid During Reporting Period		\$	0_			
7.	Expenditures - Schedule E					\$	8
8.	Unpaid Obligations - Schedule F	\$	Ø				
9.	Amount on hand at the close of this report This should equal lines (1+3+4+5) – (6-		eriod. *			\$	0_

Name of Candidate or Committee: Rick Bauenness For the reporting period ending: 12006

Appendix C

SECRETARY OF STATE

State Capitol, Suite 204
500 East Capitol Avenue
Pierre, South Dakota
57501-5070
sdsos@state.sd.us
www.sdsos.gov



Chris Nelson Secretary of State

> Chad Heinrich Deputy

State of South Dakota

Voluntary Statement of Organization for a Political Action or Ballot Question Committee

State law does not require new political action (PAC) or ballot question committees to register with the Secretary of State. Law does however require these committees to file campaign finance reports periodically following the commencement of political activity. This voluntary registration form will give the Secretary of State the information necessary to send your committee the proper reporting forms prior to the deadline for filling.

FULL NAME OF COMMITTEE:	
MAILING ADDRESS:	
COMMITTEE TREASURER:	
PHONE:	·
TYPE OF COMMITTEE (PAC or B If you are a ballot question commit supporting or opposing.	tallot Question):tee, please also indicate the measure which you are
Date:	Signature of person submitting voluntary registration